## **CHANGE OF ADDRESS FORM**

Property Identification Number:			
Physical Property Street Address:	<u> </u>		
Property Owner(s) Requesting Chang	ge:		
Old Mailing AddressN		lew Mailing Address	
Please provide a brief explanation for address change:			
Do you own any other parcels that should reflect this mailing address change?  If yes, please include a list of these parcels. If you are requesting to change the address for multiple properties, and you do not include a list, only this parcel will be changed.			
Is this property your primary residence?  Is this property vacant?  If no list the property vacant?			when did you move? property being rented?
Is the parcel in a deceased person's name?  If yes, is an heir living on the parcel?			
Does this address change include any personal property? Please indicate what type below:			
Business Boat/Mo Assets/Inv	otor Home	Aircraft	Farm Machinery or Equipment
What name is this property listed in?			Account No.
Signature of Property Owner(s): (If not property owner, a letter of authorization or power of attorney must accompany this form)			
Daytime Telephone Number:			Request Date:
Please mail this completed form to: Chatham County Board of Assessors PO Box 9786 Savannah, GA 31412-9786			
You may also fax this form to: 912-652-7334			
OFFICE USE ONL	Y		OFFICE USE ONLY

<sup>\*</sup>If not living on the property on January 1, the exemption will be removed for the current year. If you move after January 1, the exemption will be removed for the next year. If you ever move back, you must reapply for an exemption between January 1 and May 1 of any given year. If you are moving from one property to another and want to change your exemption, you must come to the Chatham County Board of Assessors between January 1 and May 1 to do this. Your exemption CANNOT be transferred from one property to another.